RFI Details

PeopleSoft Strategic Sourcing

Event ID	Format	Туре	Page
32110-0000010840	RFI	RFx	1
Event Round	Version		
1	1		
Event Name			
SWC 439 Dental Sup	plies & Equ	ipment	
Start Time		Finish Time	
01/30/2019 14:00:0	0 CST	02/05/2019 09:30:00	CST

Bidder: PUBLIC EVENT DETAILS

Submit To: General Services - CPO

312 ROSA L PARKS AVE

3rd Floor

NASHVILLE TN 37243

Contact: United States Maggie Wilson 615/741-1170

Email: Maggie.Wilson@tn.gov

Event Description

PRE-BID CONFERENCE NOTIFICATION

READ THE ENTIRE Request for Information (RFI), including the Event Details, Specifications, and Terms and Conditions and any other attachments. If the Review and bid on this event link included in the e-mail notification does not work, please go to https://supplier.edison.tn.gov. Click on the link that says Supplier Portal Home Page and then log in with your supplier ID and password. Click on the event under the Events box. Note: Information at the pre-bid will be displayed electronically. No paper copies will be provided.

Attendees are advised to prepare copies of the attached event documents for their use at the pre-bid.

This is not a bid request; this is a request for information.

Conference: Pre-Response Conference

Title: SWC 439 Dental Supplies and Equipment

Date: Tuesday, February 5, 2019

Time: 9:30AM Central Time

Location: Department of General Services, Central Procurement Office

Conference Room #: CPO Morrow Room

Tennessee Tower, 3rd Floor 312 Rosa L. Parks Avenue

Nashville, TN 37243

Conference Call-in: 615-253-0078

If you have questions, please contact the Solicitation Coordinator and Contract Administrator: Maggie Wilson at (615) 741-1170 or maggie.wilson@tn.gov or call the Central Procurement Office main number at (615) 741-1035.

Event Comments

- PRE-BID CONFERENCE NOTIFICATION

READ THE ENTIRE Request for Information (RFI), including the Event Details, Specifications, and Terms and Conditions and any other attachments. If the Review and bid on this event link included in the e-mail notification does not work, please go to https://supplier.edison.tn.gov. Click on the link that says Supplier Portal Home Page and then log in with your supplier ID and password. Click on the event under the Events box. Note: Information at the pre-bid will be displayed electronically. No paper copies will be provided.

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Туре

RFx

Bidder:

PUBLIC EVENT DETAILS

PeopleSoft Strategic Sourcing
Event ID Format

RFI

32110-0000010840 Event Round

Event Round 1 Event Name SWC 439 Dental Supp Start Time 01/30/2019 14:00:00	Finish Time	Submit To: Contact: Phone: Email:	General Services - CPO 312 ROSA L PARKS AVE 3rd Floor NASHVILLE TN 37243 United States Maggie Wilson 615/741-1170 Maggie.Wilson@tn.gov
Question		Response	
		i i i i i i i i i i i i i i i i i i i	
Factor Summary Question		Response	
	per of days that your bid offer will expire from the bid	Тоороноо	
, ,	andatany Rosponso No		
·	andatory ResponseNo		
Response Comi	ments		
Associated Terms:	Bid Offer Expiration		this heritation to Did. A serial second of
	Enter the expiration date of your bid offer in the s		·
	thirty (30) days from the bid closing date is reque	sted. The state sh	nall have sixty (60) days to accept the bid if a
	minimum period is not stated.		
	no to the following. If "yes", describe using additional ne Response including any relevant details:	l	
(a) is the Respondent voluntarily excluded fro department or agency:	presently debarred, suspended, proposed for debarn om covered transactions by any federal or state ;	nent , or	
had a civil judgment re fraud, or a criminal offe or performing a public public transaction; viol commission of embezz	nt within the past three (3) years, been convicted of, or endered against the contracting party from commission ence in connection with obtaining, attempting to obtain (federal, state, or local) transaction or grant under a lation of federal or state antitrust statutes or zlement, theft, forgery, bribery, falsification or, making false statements, or receiving stolen propert	on of in,	
(c) is the Respondent charged by a governm of the offenses detailed	presently indicted or otherwise criminally or civilly nent entity (federal, state, or local) with commission of d above; and	f any	
(d) has the Responder one or more public train or default.	nt within a three (3) year period preceding the contractions (federal, state, or local) terminated for caus	ct had se	
Required: Yes Ma	andatory ResponseNo		
Response Com	ments		

Event ID 32110-0000010840	Format Type RFI RFX	Page 8	Bidder:	PUBLIC EVENT DETAILS
Event Round	Version 1		Submit To:	General Services - CPO 312 ROSA L PARKS AVE
Event Name SWC 439 Dental Suppl	ies & Equipment			3rd Floor NASHVILLE TN 37243
Start Time	Finish Time		_	United States
01/30/2019 14:00:00	CST 02/05/2019 09:30:00 CST	F	Contact: Phone: Email:	Maggie Wilson 615/741-1170 Maggie.Wilson@tn.gov
Question			Response	
	ontrol Program or Procedures:		Response	
Required: Yes Man	· ·			
Response Comm	•			
Associated Terms:	Quality Control The vendor/contractor shall furnish com	petent, skilled s	supervision t	o insure that reasonable quality standards are
	maintained at all times.			
Event Attachments. We survey. The purpose of Central Procurement Of actionable comments of Office. Your responses	curement Office's surveying tool is include ask that you take a few short minutes to of this survey is to strengthen procurement proceed (CPO) by capturing Vendor/Bidder assort, the process put in place by the Central Fewill remain anonymous, and will have no barding of this procurement.	omplete this rocesses of the sessments of, a Procurement	nd	
Response Comm	ents			
Please list the following state law.	for all licenses and permits required by fed	deral and		
List the Type of License List the Name on the Lic List the License Numbe List the Expiration Date				
Required: Yes Man	datory ResponseNo			
Response Comm	ents			

Associated Terms:

PeopleSoft Strategic Sourcing
Event ID Format

Licenses (Listings):A bidder must have all licenses and permits required by federal, state and local laws for performance of this contract. List the date and description of each in the space provided below.

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 Event Name
 SWC 439 Dental Supplies & Equipment

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 02/05/2019 09:30:00 CST

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312 ROSA L PARKS AVE

3rd Floor

NASHVILLE TN 37243

Contact: United States Maggie Wilson 615/741-1170

Email: Maggie.Wilson@tn.gov

Question	Response
Bidder shall enter Catalog Title and Effective Date of Catalog Bid.	
Required: Yes Mandatory ResponseNo	
Response Comments	
Inventory, Time in Business	
List the Length of Time Your Company has been in Business. A bidder must have occupied a bona fide place of business for at least one year with suitable equipment, supplies and a trained staff capable of providing the products requested.	3
List the Average Inventory Dollar Amount	
Please enter the information for three comparable contracts on-going or completed within the last two (2) years.	
Comparable Contract	
List Name/Address of Comparable Contract	
List the Contact Person	
List the Phone Number	
List the Contact Person¿s Email Address.	
Required: Yes Mandatory ResponseNo	
Response Comments	

Associated Terms:

Inventory, Time in Business

A bidder must have occupied a bona fide place of business with a representative inventory of products or supplies necessary for production of the products for at least one year, must furnish satisfactory evidence of successful completion of comparable contracts for at least three customers within the past two years and must provide any other evidence required and requested in order to establish evidence of its ability to furnish the products or services in accordance with the terms and conditions and specifications. Enter the length of time in business and evidence of completion of three comparable contracts in the space below.

Failure to provide at least three comparable contract references with satisfactory quality of service may result in the bid being considered non-responsive and cause for rejection of the bid.

PeopleSoft Stra	tegic Sou	rcing Type	Page	Bidder:	PUBLIC EVENT DETAILS	
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Event Round	Version 1			Submit To:	General Services - CPO 312 ROSA L PARKS AVE	
Event Name SWC 439 Dental Sup	oplies & Eau	inment			3rd Floor NASHVILLE TN 37243	
Start Time	opiies a nga	Finish Time			United States	
01/30/2019 14:00:0	00 CST	02/05/2019 09:30:00	CST	Contact: Phone: Email:	Maggie Wilson 615/741-1170 Maggie.Wilson@tn.gov	
document, and attack efforts to achieve dive	h all pertinent ersity busines: d document ar	, included with the Terms a documentation regarding y s participation. This inform and monthly thereafter until s achieved.	our company's nation must be	vel		
·	·	leted this attached form by	choosing, "Yes	".		
Required: Yes M	landatory Res	ponse:Yes				
Response Con	nments					
rules of the Department are by reference made conditions and specifimportant: By Selection 11 and 12 and 13 and 14 and 15	ent of General de a part hered fications embo ecting YES, th	he statutes and terms conf Services, Central Procure of, in addition to the specia died in the invitation to bid bidder certifies complian without collusion or fraud	ment Office, wh I terms, ce with the abov			
Required: Yes M	landatory Res	ponse:Yes				
Response Con	nments					
	r receipt of pur	chase order will it take you	ı to deliver this			
item?	landatan, Daa	nanaaAla				
Required: Yes M	lanualory Res	ponsemo				
Response Con	nments					1
Divestment Act Tenn. each Respondent an and in the case of a j organization, under p belief that each Resp Ann. § 12-12-106." F	. Code Ann. § d each person oint response penalty of perju pondent is not	ng statement, as required 12-12-111: "By submission signing on behalf of any Feach party thereto certifies ry, that to the best of its knon the list created pursuan urposes, the list is currentl	of this respons Respondent cert s as to its own nowledge and it to Tenn. Code	ifies,		
online at: https://www.tn.gov/ge library-/public-information		/procurement/central-procu ml	urement-office	cpo-/		\neg

Required: Yes Mandatory ResponseNo

PeopleSoft Strategic Sourcing Event ID Format Type Page Bidder: **PUBLIC EVENT DETAILS** 32110-0000010840 RFx **Submit To:** General Services - CPO **Event Round** Version 312 ROSA L PARKS AVE 3rd Floor **Event Name** SWC 439 Dental Supplies & Equipment NASHVILLE TN 37243 Start Time **United States Finish Time** Maggie Wilson 615/741-1170 01/30/2019 14:00:00 CST 02/05/2019 09:30:00 CST Contact: Phone: Email: Maggie.Wilson@tn.gov

Response Comment	ts	
Question		Response
List the Return Goods P	olicy:	
Required: Yes Man	datory ResponseNo	
Response Comm	ents	
Associated Terms:	Return Goods Policy All costs associated with the return of goods for repair expense of the vendor/ contractor, unless otherwise sp	and/or replacement under warranty shall be done at the pecified. The bidder shall indicate below their standard return
	goods policy.	
Please list the following administrator.	information regarding your company's contract	
List the Contract Admini	strator's Name	
List the Contract Admini	strator's Address	
List the Contract Admini	strator's Phone Number	
List the Contract Admini	strator's Toll Free Phone Number	
List the Contract Admini	strator's Pager or Cell Number	
List the Contract Admini	strator's Email Address	
List the Contract Admini	strator's Website	
Required: Yes Man	datory ResponseNo	
Response Comm	ents	

Associated Terms: Vendor Contract Administrator

The bidder shall list their company's Contract Administrator. The Contract Administrator shall be the contact person for all questions regarding the contract. Note: The bidder can attach a list of alternate personnel to contact to

the bid.

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312 ROSA L PARKS AVE

3rd Floor

NASHVILLE TN 37243

Contact: United States Maggie Wilson 615/741-1170

Phone: 615/741-1170 Email: Maggie.Wilson@tn.gov

Question	Response	

Service Experience, Time in Business, Contracts

List the Length of Time Your Company has been in Business. A bidder must have occupied a bona fide place of business for at least one year with suitable equipment, supplies and a trained staff capable of performing the services requested.

List the Description of Services. Please enter the information for three (3) comparable contracts on-going or completed within the last two (2) years.

Comparable Contract

List Name/Address of Comparable Contract

List the Contact Person

List the Phone Number

List the Contact Person's Email Address.

Required: Yes Mandatory ResponseNo

Res	ponse	Comments

Associated Terms:

Service Experience, Time in Business - Contracts

A bidder must have occupied a bona fide place of business for at least one year with suitable equipment, supplies and

a trained staff capable of performing the services requested. A bidder must furnish satisfactory evidence of successful completion of comparable contracts for at least three customers within the past two years and any other

evidence required and requested in order to establish evidence of its ability to provide services in accordance with

the terms and conditions and specifications. Enter the length of time in business and evidence of completion of three comparable contracts in the space provided below.

Failure to provide at least three comparable contract references with satisfactory quality of service may result in the bid being considered non-responsive and cause for rejection of the bid.

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Event ID	Format	Type	Page
32110-0000010840	RFI	RFx	8
Event Round	Version		
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Event Name			
SWC 439 Dental Supp	olies & Equ	ipment	
Start Time		Finish Time	
01/30/2019 14:00:0	0 CST	02/05/2019 09:30:00	CST

Bidder: **PUBLIC EVENT DETAILS**

Submit To:

General Services - CPO 312 ROSA L PARKS AVE

3rd Floor

NASHVILLE TN 37243

United States
Maggie Wilson
615/741-1170
Maggie.Wilson@tn.gov Contact:

Phone: Email:

PeopleSoft Strategic Sourcing
Event ID Format

Type Page 32110-0000010840 Event Round RFx Version **Event Name** SWC 439 Dental Supplies & Equipment Start Time Finish Time 01/30/2019 14:00:00 CST 02/05/2019 09:30:00 CST

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General Services - CPO 312 ROSA L PARKS AVE

3rd Floor

NASHVILLE TN 37243

United States Maggie Wilson 615/741-1170 Contact: Phone:

Maggie.Wilson@tn.gov Email:

Bidder Information

<u> </u>		
Firm Name:		
Name:	Signature:	Date:
Phone #:	Fax #:	
Street Address:		
City & State:	Zip Code:	
Email:		

PeopleSoft Strategic Sourcing

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Event ID	Format	Туре	Page
32110-0000010840	RFI	RFx	10
Event Round	Version		
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Event Name			
SWC 439 Dental Supp	olies & Equ	ipment	
Start Time		Finish Time	
01/30/2019 14:00:00	O CST	02/05/2019 09:30:00 CS	T

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312 ROSA L PARKS AVE

3rd Floor

NASHVILLE TN 37243

United States Maggie Wilson 615/741-1170

Phone: 615/741-1170 Email: Maggie.Wilson@tn.gov

Contact:

Appendix B - Terms & Conditions

- The undersigned acknowledges that all submitted information and documentation will become the property of the state of Tennessee. The undersigned also affirms that the information given above is true, accurate, and includes pertinent information necessary to identify and explain the operation of this organization to the best of my knowledge and is in no way misleading.
- 2. Should any data change in the future, the Supplier agrees to immediately submit the correct information electronically through the State's Supplier Portal.

If the information will be submitted in writing please mail to the following address:

Department of Finance and Administration 312 Rosa L. Parks Ave. 21st Floor Tennessee Tower ATTN: Supplier Maintenance Nashville, TN 37243

3. No person on the grounds of handicap or disability, age, race, color, religion, sex, national origin, creed, or any other classification protected by Federal and/or Tennessee State constitutional and/or statutory law shall be excluded from participation in, or denied benefits of, or be otherwise subjected to discrimination in the performance of the Contract or in the employment practices of the Contractor. The Contractor shall, upon request, show proof of such non-discrimination, and shall post in conspicuous places, available to employees and applicants, notices of non-discrimination.

Last Updated: 08/30/2016